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BAKER BOTT 2001 ROSS AVE SUITE 600	S L.L.P. NUE	/2006		have its own certificate of mailing or transmission. Certificate of Mailing ar Transmission Increby certify that this Fee(s) Transmits is being deposited with the United States Footal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being finsimile transmitted to the USFTO (5/11) 273-2885, on the table indicated below.		
DALLAS, TX 75201-2980				(Depositor's name)		
						(Signature)
						(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/046,466 01/11/2002 Jerzy W. Miernik 062891.0675 9340 TITLE OF INVENTION: SYSTEM AND METHOD FOR IDENTIFYING A WIRELESS SERVING NODE FOR A MOBILE UNIT						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	01/03/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
LY, NGHI H		2617	455-435000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). ☐ Change of correspondence address (or Change of Correspondence Address form FTO/SE 1.22) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form FTO/SE47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			Por printing on the patent front page, list (1) the names of up to 3 registered patent attorneys register of As internatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name with perinticel,			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (orint or type) PLEASE, NOTE: Unless an assigne is identified below, no assigned tast will appear on the patent. If an assignee is identified below, the document has been filled i recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) CISCO, Technology, Inc. San Jose, California Please check the appropriate assignee category or categories (will not be printed on the patent): Dindividual 20 Corporation or other private group entity						
4a. The following fee(s) are submitted: 4a			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A chack is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby suthorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number. ()2—1384. (eficience an extra copy of this form).			
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Authorized Signature Typed or printed name	All and	P. Williams	x Office.	Date	12/28/66 10. 40,227	
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